

MDPH EMERGENCY CONTRACEPTION DISPENSING ANNUAL REPORT

MGL c. 94C, § 19(A)(d)

By August 1st of each year, report the total number of Emergency Contraception (Plan B) units of use dispensed pursuant to a Standing Order for the period from July 1 – June 30 of the prior year. If it is not possible to segregate the Standing Order dispensings of EC (Plan B), report total number of units of EC (Plan B) use dispensed pursuant to prescriptions for the period.

Submit report electronically to the Massachusetts Department of Public Health
by emailing this annual report form as an attachment to:
pharmacy.dph-ec@dph.state.ma.us

Pharmacy Name: _____

Address: _____

City/Town/Zip Code: _____

Retail Pharmacy: Pharmacy Permit No. (Pharmacy Board) _____

Hospital/Clinic Pharmacy: Controlled Substance Registration No. (DCP): _____

For Period from July 1 to June 30, _____:

Total number of units of use of EC (Plan B) dispensed pursuant to a Standing Order:

Or, if not available: Total number of units of use of EC (Plan B) dispensed pursuant to prescription:

Authorized Pharmacy Representative

Name: _____

Title: _____

Email : _____

Reports submitted pursuant to MGL c. 94C § 19(A)(d) are not public records and
shall not include any patient names or identifiers.